## PART B - FEE(S) TRANSMITTAL



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JAN 2 B 2005

Mail Stop ISSUE FEE Commissioner for Patents P.O. Box 1450

Alexandria, Virginia 22313-1450

(703) 746-4000 or Fax

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	INSTRUCTIONS: This for appropriate. All further con indicated unless corrected maintenance fee notification	rm should wased for transcrespondence to be below or directed differences.	smitting the ISSU Patent, advance or in Block 1, by (a	JE FEE and rders and not a) specifying	PUBLIC ification a new co	ATION FEE (if requ of maintenance fees v orrespondence address	ired). Blocks 1 through 5 s vill be mailed to the current and/or (b) indicating a sep	should be completed where correspondence address as arate "FEE ADDRESS" for	
	•	CE ADDRESS (Note: Use Block 1 for 12/01/2004			for any other accompanying				
	THOMAS, KAY 100 GALLERIA P STE 1750 ATLANTA, GA 30	YER & RISLI	LEY, LLP		Certificate of Mailing or Transmission  I hereby certify that this Fee(s) Transmital is being deposited with the States Postal Service with sufficient postage for first class mail in an en addressed to the Mail Stop ISSUE FEE address above, or being fa transmitted to the USPTO (703) 746-4000, on the date indicated below.				
02/	02/01/2005 JBALINA2 00000046 10672903					Marianne	Boland	(Depositor's name)	
01	FC:1501	1400.00 OP				Mariana	e Boland	(Signature)	
	FC:1504 FC:8001	300.00 OP 30.00 OP				01-	25-05	(Date)	
	APPLICATION NO.	FILING DATE		FIRST NAME	D INVEN	TOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.	
	10/672,903	09/26/2003		Tirdad	Sowlati		051933-1140	9176	
		NVELOPE ERROR EXTRA					FEE (if required). Blocks 1 through 5 should be completed where tenance fees will be mailed to the current correspondence address as dence address; and/or (b) indicating a separate "FEE ADDRESS" for certificate of mailing can only be used for domestic mailings of the transmittal. This certificate cannot be used for any other accompanying Each additional paper, such as an assignment or formal drawing, mustown certificate of Mailing or Transmission.  Certificate of Mailing or Transmission certify that this Fee(s) Transmittal is being deposited with the United ostal Service with sufficient postage for first class mail in an envelope dto the Mail Stop ISSUE FEE address above, or being facsimile ted to the USPTO (703) 746-4000, on the date indicated below.  Lanne Boland (Depositor's name)  ATTORNEY DOCKET NO. CONFIRMATION NO.  051933-1140 9176  ON FEE TOTAL FEE(s) DUE DATE DUE  ATTORNEY DOCKET NO. CONFIRMATION NO.  051933-1140 9176  ON FEE TOTAL FEE(s) DUE DATE DUE  O \$1670 1700 03/01/2005  CLASS  5000  It front page, list egistered patent attorneys and the names of up to so or agents. If no name is each of the names of up to so agents. If no name is each of the names of up to so agents. If no name is each of the names of up to so agents. If no name is each of the names of up to so agents. If no name is each of the names of up to so agents. If no name is each of the names of up to so agents. If no name is each of the names of up to so agents. If no name is each of the names of up to so agents. If no name is each of the names of up to so agents. If no name is each of the names of up to so agents. If no name is each of the names of up to so agents. If no name is each of the names of up to so agents. If no name is each of the names of up to so agents. If no name is each of the names of up to so agents. If no name is each of the names of up to so agents. If no name is each of the name of up to so agents. If no name is each of the name of up to so a name of up to s		
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	nonprovisional	NO		- 4 <i>1</i> 00 	<b>,</b>	\$300 .	\$1 <del>670</del> 17 <i>0</i> 0	03/01/2005	
l	EXAM	IINER	ART UN	IIT	CL	ASS-SUBCLASS			
	VO, NGUY	2685			455-126000				
<ol> <li>Change of correspondence address or indication of "Fee Address" (37 CFR 1.363).</li> <li>Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.</li> <li>"Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required.</li> </ol>				or agents OR, alternatively,  (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to					
	PLEASE NOTE: Unless recordation as set forth in	an assignee is identified be 37 CFR 3.11. Completion	elow, no assignee of this form is NO	data will app T a substitute	ear on the for filing	ne patent. If an assign g an assignment.	ee is identified below, the o	document has been filed for	
	(A) NAME OF ASSIGN	EE	(B	(B) RESIDENCE: (CITY and STATE OR COUNTRY)					
	Skyworks	Solutions, I	nc.		Ir	vine, CA			
•		assignee category or catego				Individual XXC	orporation or other private gr	oup entity Government	
•				4b. Payment of Fee(s):					
	Issue Fee Dublication Fee (No small entity discount permitted)			A check in the amount of the fee(s) is enclosed.					
		Copies <u>Ten (10)</u>	ea) 	The Dire	ector is h		harge the required fee(s), or	credit any overpayment, to	
:	_	(from status indicated above		_			<u> </u>	CFR 1.27(g)(2).	
;	The Director of the USPTO	is requested to annly the Issu	e Fee and Publicat						

NOTE: The Issue Fee and Publication Fee (if any) or to re-apply any previously paid issue fee to the application identified above. NOTE: The Issue Fee and Publication Fee (if application records of the Issue Fee and Publication Fee (if application fee in the Issue Fee and Publication Fee (if application fee in the Issue Fee and Publication Fee (if any) or to re-apply any previously paid issue fee to the application identified above. NOTE: The Issue Fee and Publication Fee (if any) or to re-apply any previously paid issue fee to the application identified above. NOTE: The Issue Fee and Publication Fee (if any) or to re-apply any previously paid issue fee to the application identified above.

Typed or printed name <u>David Rodack</u>

Authorized Signature \_

Date 1/25/05

47,034 Registration No. \_

This collection of information is required by 37 CFR 1.311. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, Virginia 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, Virginia 22313-1450.

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FEE TRANSMITTAL for FY 2003

JAN 2 8 2005

Complete If Known Application Number 10/672,903 September 26, 2003 Filing Date First Named Inventor Tirdad Sowlati Vo, Nguyen Thanh **Examiner Name** Group / Art Unit 2685 051933-1140

revisions. Effective 01/01/2003. Patent fees are subject to ann Applicant claims small entity status. See 37 CFR 1.27 TOTAL AMOUNT OF PAYMENT 1.730.00

METH	FEES CALCULATION (continued)						
Check	3. ADDITIONAL FEES Large Entity Small Entity						
	Order		Entity Fee	Fee	Entity Fee	Fee Description	Fee Paid
Deposit		Fee Code	(\$)	Code	(\$)	ree Description	1 cc i aid
Account		1051	130	2051	65	Surcharge-late filing fee or	
		1052	50	2052	25	oath Surcharge-late provisional	
Deposit Account						filing fee or cover sheet	<u> </u>
Number	20-0778	1053	130	1053	130	Non-English specification	
		1812	2,520	1812	2,520	For filing a request for ex parte reexamination	
Deposit Account Name	The state of the s	1804	920*	1804	920*		
Name	Thomas, Kayden, Horstemeyer Risley, L.L.P.	il				SIR prior to Examiner action	
The Commission	er is authorized to: (check all that apply)	1805	1,840*	1805	1,840*	Requesting publication of SIR after Examiner action	1
	indicated below	1251	110	2251	55	Extension for reply within first	
Charge any ad	ditional fee(s) during the pendency of this application	i			005	month	
Charge any ad	indicated below, except for the filing fee to the above-	1252	410	2252	205	Extension for reply within second month	
identified depo	sit account	1253	930	2253	465	Extension for reply within	
identilled depo	FEE CALCULATION	1			705	third month	
1. BASIC FILING		1254	1,450	2254	725	Extension for reply within fourth month	
Large Entity	Small Entity	1255	1,970	2255	985	Extension for reply within fifth	
Fee Fee	Fee Fee Fee Paid	1		0404	400	month	
Code (\$)	Code (\$) Fee Description	1401	320	2401	160	Notice of Appeal	
1001 750	2001 375 Utility Filing Fee	1402	320	2402	160	Filing a brief in support of an appeal	1 1
		1403	280	2403	140		
1002 330	2002 165 Design Filing Fee	1451	1,510	1451	1,510	Petition to institute a public	
1003 520	2003 260 Plant Filing Fee					use proceeding	
1004 750	2004 375 Reissue Filing Fee	1452	110	2452	55	Petition to revive- unavoidable	1 1
1005 160	2005 80 Provisional Filing Fee	1453	1,300	2453	650	Petition to revive-	
1003 100		1		0504	700	unintentional	1,400.00
}	SUBTOTAL (1) (\$)	1501	1,400	2501	700	Utility issue fee (or reissue)	1,400.00
2. EXTRA CLAIN	I FEES FOR UTILITY AND REISSUE	1502	470	2502	235	Design issue fee	
	Extra Fee Fee Claims From Paid	1503	630	2503	315	Plant issue fee	
	Below	1460	130	1460	130	Petitions to the Commissioner	
Total Claims	- 20**= X 9.00 =	1807	50	1807	50	Processing fee for	
Independent	- 3** = 0 X 42.00 =	1			400	provisional application Submission of Information	
Claims	140.00 =	1806	180	1806	180	Disclosure Stmt	
Multiple Dependent	140.00	8021	40	8021	40	Recording each patent	
	0 115-4/5-					assignment per property (times number of properties)	
Large Entity Fee Fee	Small Entity Fee Fee Fee Description	1809	750	2809	375	Filing a submission after final	
Fee Fee Code (\$)		1				rejection (37 CFR § 1.129(a))	
1202 18	Code (\$) 2202 9 Claims in excess of 20	1810	750	2810	3/5	For each add, invention to be examined (37 CFR 1.129(b))	
1201 84	2201 42 Independent claims in excess of 3	1801	750	2801	375	Request for Continued	
1203 280	2203 140 Multiple dependent claim, if not paid			4000	000	Examination (RCE)	<u> </u>
1204 84	2204 42 **Reissue independent claims over	1802	900	1802	900	Request for expedited exam. of a design application	
	original patent				lication F	ee	300.00
and over original patent			fee (specify	y) Adv	ance Cop	oies (10)	30.00
<b>i</b> '	SUBTOTAL (2) (\$)			•		SUBTOTAL (3) (\$)1	,730.00
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**or number prev	iously paid, if greater; For Reissues, see	11					
above	*Redu	ced by Bas	sic Filing I	Fee Paid			
SUBMITTED BY					Complete (if applica	ble)	
	David Rodack \	Red	istration No	o. 47.034	4	Telephone 770-	933-9500
Typed or Printed Name		,			Date		
Signature						1	
						1/25/05	
	Jack WVV					1,05,03	

Attorney Docket No.